

**Multi-Country Study on  
Trusted Partners among Youth:  
Eritrea, Tanzania, Zambia,  
and Zimbabwe**

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## Executive Summary

### Objectives

- Explore youth's definitions of "trust"
- Establish criteria youth use to determine the trustworthiness of partners
- Identify types of individuals youth believe they can and cannot "trust"
- Examine trust's influence on sexual decision-making and STI/HIV risk perception
- Identify how sexual partners violate trust and the effects on sexual decision-making

### Study design

Data were collected in October 2001 as part of a regional Behavior Change Communication (BCC) strategy in East and Southern Africa. Country programs chose to participate in research based on project priorities and levels of interest in participating in a regional BCC strategy. Four country programs agreed to collect and share data, Eritrea, Tanzania, Zambia, and Zimbabwe.

A total of 33 focus groups were conducted. Research teams in each country used the same discussion guide and pretested the guide prior to data collection. Discussion groups lasted between an hour and an hour and a half, were audiotaped, and transcribed into English. Each research team conducted two discussion groups in the major urban area composed of the following strata: males 15-19 years, females 15-19 years, males 20-24 years, and females 20-24 years. The Zambia program conducted one additional focus group with males aged 15-19.

### Findings

- ***Explore youth's definition of "trust" and criteria used to determine trustworthiness***

The major components of trust did not vary greatly across countries. Youth in all countries placed a high value on sexual fidelity and its role in trusted partnerships. Youth believed that partners met through family or friends are more trustworthy than those met in bars or nightclubs. In addition, youth in all countries expressed that trusted partners must pass informal assessments, dress appropriately, demonstrate appropriate social conduct, talk sweetly to each other, come from the right neighborhood, meet one another's family, be punctual for appointments/dates, and remain emotionally committed to one another. Eritrean youth appeared to place greater importance on the roles that religion, virginity, and marriage (or intent to marry) play in establishing trust than youth from other countries.

Differences in criteria for trust were more apparent by gender. In terms of testing partners' trustworthiness, females discussed passive ways of questioning partners, while males discussed elaborate methods for entrapping females in lies. Males were concerned with partners' sexual reputation and appearance. Females were primarily concerned with partners' emotional commitment, willingness to accept responsibility for pregnancies, and ability to display affection in public in order to demonstrate intimacy and trust.

- ***Identify types of individuals youth believe they can and cannot “trust”***

Across countries, youth place prospective partners into groups that can and cannot be trusted according to key attributes and behaviors. Similar to the findings above, most participants said that youth that come from good families, are well respected in the community, are religious, do not drink, avoid bars and nightclubs, and are faithful can be trusted. Youth believe that they cannot trust anyone outside of committed, monogamous relationships. Male participants added that virgins can be trusted.

- ***Examine trust’s influence on sexual decision-making and STI/HIV risk perception***

Youth do not appear to take effective preventive measures with trusted partners. Trust can blind them to their risk for STIs/HIV and render them unwilling to explore partners’ sexual histories. Sex usually occurs early in relationships and condom use remains low. When youth use condoms, they are more likely to incorporate them into casual than trusted relationships, or use them for pregnancy prevention rather than protection from STIs/HIV. Condoms are usually abandoned once relationships appear to be serious and partners fail to show signs or symptoms of STIs or HIV infection. There were few differences in risk perception and risk behavior across countries; however, male participants in Zambia reported that they discuss their sexual histories, while participants from other countries said that couples rarely discuss their sexual histories.

- ***Identify how sexual partners violate trust and the effects on sexual decision-making***

Infidelity represents the most serious violation of trust and usually results in the end of relationships. A common theme across all countries was youth’s refusal to learn from past experiences and apply them to future sexual decision-making. Even when trust is broken, youth fail to apply lessons learned to new relationships, repeating the same scenarios of trust, infidelity and exposure to STIs/HIV.

## **Programmatic implications**

Youth must understand that partners’ trustworthiness and character are independent of their risk for STIs/HIV. Although a checklist may help youth select a good partner, unprotected sex with this or any other person must be perceived as risky. Youth must also personalize their risk for STIs/HIV and avoid thinking that only people outside of their community are at risk for infection. It is likely that interpersonal communication campaigns or other community-level activities will help achieve an improved risk perception. Finally, in order to communicate new and appropriate levels of personal risk assessment, programs should strive to achieve broad social support, if not pressure for, consistent condom use, knowledge of one’s own HIV status as well as that of all partners, and delay of sexual activity where possible.

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## **Acronyms**

AIDS	Auto Immune Deficiency Syndrome
BCC	Behavior Change Communication
CSW	Commercial Sex Worker
HIV	Human Immunodeficiency Virus
PSI	Population Services International
STIs	Sexually Transmitted Infections

## Introduction

Rates of HIV/AIDS and sexually transmitted infections (STIs) are increasing in sub-Saharan Africa where AIDS is the leading cause of death (UNAIDS, 1999; Monitoring the AIDS Pandemic (MAP) Network, 2000). Although many STIs, often precursors to HIV infection, can be treated with antibiotics, no cure is yet available for HIV/AIDS, leaving prevention as the primary method for controlling the epidemic. Increasing condom use, reducing lifetime number of partners, and increasing abstinence remain the key means of AIDS prevention (World Bank, 1997; Reinecke, Schmidt, & Ajzen, 1996). Youth are especially vulnerable to STIs and HIV infection due to their high levels of sexual activity, transitory sexual relationships, and insufficient rates of condom use (Mehryar, 1995; National Research Council, 1996; Meekers & Calves, 1997; Meekers, Klein, & Foyet, 2001; Williams et al., 2001).

Although youth usually recognize that STIs and HIV pose a threat for young people in their communities, many find it difficult to personalize risk and make appropriate decisions to reduce risk. Researchers in developed countries have found that youth often rely on sexual partners' general trustworthiness to gauge their risk for STIs/HIV rather than using more appropriate criteria, such as partners' sexual histories (Holland et al., 1991; Hillier, Harrison, & Warr, 1998; Kirkman, Rosenthal, & Smith, 1998; Gavin, 2000). Studies indicate that individuals often use partner attributes such as appearance or reputation to determine whether or not partners are safe (Waldby, Kippax, & Crawford, 1993; Plichta et al., 1992; Hillier et al., 1998; MacPhail & Campbell, 2001). Likewise, many youth presume that trusted partnerships contain high levels of emotional commitment, intimacy, and fidelity (Holland et al., 1992; Fortenberry et al., 2002).

Despite the value that youth place on trusted partnerships, studies have found that most relationships are short-term and that youth follow a cycle of serial monogamy with several trusted partners (Kirkman et al., 1998; Fortenberry et al., 2002). For example, among unmarried youth living in urban Cameroon, 11% of females and 20% of males reported having one or more regular sexual partners in the past 12 months (Meekers et al., 2001). Two thirds (67%) of adult urban males in Zimbabwe reported having two or more sexual partners in the past year (Meekers, 2001). A fifth (17%) of unmarried females aged 20-24 in Tanzania reported having two or more sexual partners in the past year, as did a third (32%) of males (Tanzania National Bureau of Statistics & Macro International Inc., 2000). Such high levels of partner change suggest that youth engage in a number of partnerships before committing to one lifetime partner.

Studies from both developed and developing countries find that youth are less likely to use condoms with partners they deem trustworthy (Holland et al., 1992; Holland et al., 1991; Plichta et al., 1992; Waldby et al., 1993; Lear, 1995; MacPhail & Campbell, 2001; Agha et al., 2002). Studies conducted in developed countries suggest that some youth believe that having trusted partners rather than using condoms can reduce their risk for STIs and HIV (Ingham, Woodcock, & Stenner, 1991; Hillier et al., 1998). Suggesting condom use can undermine trust and threaten the stability of relationships, especially when partners interpret such suggestions as admissions or accusations of sexual infidelity



(Holland et al., 1991; Kirkman et al., 1998; Wingood & DiClemente, 1998). Several studies have found that young women are especially reluctant to suggest condom use with trusted partners for fear of being labeled “promiscuous” or overstepping their prescribed gender roles in relationships (Holland et al., 1991; Amaro, 1995; Hynie et al., 1998; Kirkman et al., 1998). Some youth in Cameroon reported that forgoing condom use implies that they trust their partners (Calvès, 1999). Youth also perceive it to be necessary to use condoms with less trustworthy individuals, such as one-night stands or casual partners (Holland et al., 1992; Lansky, 1998). Even when youth incorporate condom use into sexual relationships, use appears to diminish over time or as relationships become more serious (Fortenberry et al., 2002; Lansky, 1998; Plichta et al., 1992; Ku, Sonenstein, & Pleck, 1994).

Little qualitative research has been conducted in sub-Saharan Africa that addresses the topic of trusted partners among youth. Previous studies point to the importance of evaluating youth’s construction of trust in relationships, its role in sexual decision-making, and appropriate applications for targeting trusted relationships in STI and HIV prevention programs (Kirkman et al., 1998). Few authors attempt to establish youth’s definition of trust. This study explores the many definitions and descriptions that youth have for trust. It explores youth’s definitions of trust, establishes the criteria youth use to determine partners’ trustworthiness, and identifies types of individuals youth believe they can trust. It also examines how trust influences youth’s sexual decision-making and perception of risk for STIs and HIV, and identifies how partners violate trust and affect future decisions regarding sexual activity.

## **Background**

Data were collected in October 2001 as part of a regional Behavior Change Communication (BCC) strategy in East and Southern Africa. Results will be used to inform the creation of a communication strategy that addresses the topic of trusted partners among youth and the that role trust plays in risk perception for STIs and HIV. Population Services International (PSI) country programs chose to participate in regional research based on project priorities and levels of interest in participating in a regional BCC strategy. Four county programs agreed to collect and share data, Eritrea, Tanzania, Zambia, and Zimbabwe.

Even though AIDS prevention is recognized as a national priority in these countries and officials have implemented intensive AIDS prevention programs (Agha, 1998), HIV prevalence remains high, especially in Zambia and Zimbabwe (UNAIDS, 2000d; Adetunji & Meekers, 2001; Agha et al., 2002; Mnyika, Kvale, & Klepp, 1995). Specific data and behavioral profiles are outlined below for each country.

### **Eritrea**

Eritrea, with an estimated HIV prevalence of 3% in 1994, has a lower rate of infection than many African countries (UNAIDS, 2000c). However, behavioral risks such as early sexual onset and low levels of condom use may contribute to increased rates of infection

in the future. A 2001 survey revealed that the vast majority of Eritreans aged 20-24 (88%) reported that they were sexually active by age 19 (Bila et al., 2002). Among those aged 17-24, three-quarters reported using a condom during their last sexual act with a regular partner. Among those who reported not using condoms, 75% said they did not use a condom because they trust their regular sexual partner (Agha et al., 2002). While condom use with regular partners is relatively high (75%), condom use in the last sex act with casual partners is even higher (90%, Bila et al., 2002).

### **Tanzania**

With an estimated HIV prevalence of 8% in the general population, UNAIDS considers Tanzania a high prevalence country. Despite knowledge of AIDS being nearly universal among youth, rates of condom use remain low (Stat Compilier, 2002; UNAIDS, 2000d). In Kilimanjaro and Arusha, only half of surveyed youth reported that they had ever used condoms for STI/HIV prevention (Mnyika et al., 1995). In addition, sexual onset is relatively early among youth. In 1999, the median age at first sex among males aged 20-24 was 17.8 years and for females in the same cohort, 17.4 years (UNAIDS, 2000d).

### **Zambia**

At the end of the 1990's, Zambia had an estimated HIV prevalence of 20%, making it one of the worst affected countries in the world (UNAIDS, 2000a). Despite high levels of general knowledge about HIV/AIDS, risk behaviors are common. Youth in Zambia begin sexual activity at a relatively early age. In 1999, median age at first sex for males aged 20-24 was reported to be 16.0 years while for women aged 20-49, the median age was 16.4 years (UNAIDS, 2000a). This early sexual initiation is coupled with low levels of reported condom use. A 1998 study revealed that among respondents who reported that their last sexual contact was with a regular partner, only one-third used a condom (Agha, 1998). A 1999 survey of urban Zambia reveals that a quarter of the female and a half of the male respondents who reported not using a condom in their last sex act with a regular partner, stated that they did so because they trust their partner (Agha et al., 2002).

### **Zimbabwe**

In 1999, UNAIDS estimated Zimbabwe's HIV prevalence rate among those aged 15-49 to be 25%, one of the highest rates of infection in the world (UNAIDS, 2000b). Even though general knowledge of HIV/AIDS has been high since the late 1980's, reported condom use remains low (Adamchak, Mbizvo, & Tawanda, 1990). In a 1997 survey, survey, only one-half of males and one-third of females reported consistent condom use with a non-marital partner (Adetunji & Meekers, 2001). A 1999 study revealed that among adult respondents who reported not using a condom with their regular partner at last sex act, 77% of females and 59% of males reported not using condoms because they trust their partner (Agha et al., 2002).

## **Methods**

A total of 33 focus groups were conducted. Each country program conducted two discussion groups in the major urban area composed of the following strata: males 15-19 years, females 15-19 years, males 20-25 years, and females 20-24 years. The Zambia program conducted one additional focus group with males aged 15-19 years. The same discussion guide was used for all four countries and had been pretested by research teams in each country prior to data collection. Same sex moderators conducted discussions in the lingua franca (either the dominant local language or English), and a note-taker was present for each group. Discussion groups lasted between an hour and an hour and a half, were audiotaped, and transcribed into English. Researchers at PSI headquarters in Washington, D.C completed data analysis. Trainees at a qualitative research workshop in Kigali, Rwanda contributed to the coding of portions of the transcripts. All researchers used the text-based software Ethnograph 5.0 to highlight common and divergent themes in study transcripts.

### ***Participant recruitment***

General guidelines for recruitment that specified strata by age, sex, and urban residence were provided to field research staff. Researchers determined the most appropriate mix of educational and employment status for the local context. An additional criterion for recruitment was that participants be willing to discuss sex and relationships between youth, with the objective of recruiting those who were most likely to be sexually active. However, youth were not excluded if they had never been in a relationship. Researchers asked participants to complete a profile sheet that provided information on their age, religion, level of education, marital/relationship status, occupation, and number of children.

### ***Eritrea***

Focus groups were conducted in Asmara between October 10 and 13, 2001. Groups consisted of eight to ten participants. Most youth reported that they had no current boyfriend/girlfriend and most had not had a boyfriend/girlfriend in the last year. None of the participants reported being married or having children. All of the respondents reported that they had above a primary level of education and that they could read and write at least one language. Most participants were recruited through the National Union of Eritrean Youth and Students, which may have resulted in higher levels of awareness about HIV/AIDS than expected.

### ***Tanzania***

Focus groups were conducted in Dar es Salaam between October 10 and 13, 2001. Groups consisted of six to eleven participants who had a wide range of educational levels. A few participants reported that they were unable to read or write in any language and had completed no formal education. Most participants had achieved either a primary

or secondary level of education, and one group of females aged 20-25 years had completed university. Most youth reported that they currently had or had had a boyfriend/girlfriend in the last year. Some of the participants were married and some reported that they had one child.

### ***Zambia***

Focus groups were conducted in Lusaka between October 8 and 12, 2001. Groups consisted of six to twelve participants. Most youth reported having received some education, though educational attainment varied from no education to secondary education. Most youth reported that they could read and write in English or a local language. None of the youth reported being married, though several female participants reported that they had one child. None of the males in the Zambian focus groups reported having children. All participants reported that they currently had or had had a boyfriend/girlfriend in the last year.

### ***Zimbabwe***

Detailed participant profiles are not available for Zimbabwe. Participants were divided according to age, gender, and level of income (medium versus low).

### ***Discussion Guide***

Researchers in all four countries used a common discussion guide, which they had pretested prior to data collection. Discussions covered relationship development, definitions of trust, criteria for trustworthiness, and expectations of trusted partners. Questions about relationship development included descriptions of how, where, and through whom youth meet partners. Discussion topics also included knowledge about HIV/AIDS, risk perception for STIs/HIV, acquisition of sexual histories, and preventive behavior adopted by youth.

## **Results**

### **Youth's definitions and perceptions of "trust"**

Participants stressed the important role that trust plays in relationships among youth. Male and female participants described general qualities of trusted partnerships, traits sought in potential partners, and levels of emotional commitment required in such relationships. For the most part, they agreed on standards for trust. However, some male participants appeared to be more concerned than females with potential partners' sexual reputation. Some also thought that males who are incapable of sexual fidelity should hide their indiscretions. Females, especially those in Eritrean groups, appeared to be more concerned than males about establishing committed relationships before engaging in sex and trusting partners.

### ***Qualities of “trusted” partnerships***

Study participants explained that trusted relationships contain several qualities. They stressed that “knowing someone well” is a prerequisite for establishing trust and becoming close emotionally. “Being there for someone,” “being honest,” and “being open” with one another are essential for maintaining trusted partnerships. They added that showing “respect” for partners is important, as is demonstrating a sense of loyalty in relationships.

“Each (partner) must know the expectations of the other; his/her likes and dislikes as well as his/her weaknesses and strengths. A boy must know that ‘if I do this, my girl will be annoyed’ and ‘if I do this, she’ll be happy’ (Zambian male, 20-25 years).”

“Partners should respect each other and keep promises (Zambian male, 15-19 years).”

“If he helps her, encourages her, respects her feelings, and fulfills her desires she can say, ‘I trust him’ (Eritrean female, 15-19 years).”

### ***Qualities sought in potential partners***

Although it is covered in more detail in other sections of this report, it is important to note that participants stressed that trusted partners must be of “good character.” They explained that youth judge potential partners’ character by observing their behavior and asking others about their background. Male participants appeared to be concerned with partners’ sexual reputation while females seemed to be primarily concerned with partners’ emotional commitment to relationships.

“She must observe his movements and find out if he loves her. Only then is she able to trust him (Eritrean female, 15-19 years).”

“I’ll never trust a lady (that) I know has been sleeping around with different people (Zimbabwean male, 15-19 years).”

Male and female participants stated that partners’ behavior within relationships is also important. They spoke at length about appropriate “conduct.” In their opinion, it is important that partners be consistent in their behavior and demonstrate that they care for one another.

“If (a partner) makes a mistake and is advised to correct it, but he makes it again or even a third time, I can’t trust him (Eritrean female, 15-19 years).”

“(A partner) can be trusted by how he behaves, not by what he says about himself, but by the things he does to show her his love and that he cares for her (Eritrean female, 20-25 years).”

## ***Fidelity***

Participants spoke at length about sexual fidelity and the role it plays in establishing and maintaining trust in youth's relationships. They used several euphemisms for infidelity such as "double cross," "move around," "jump around," and "disappoint." Participants said that both male and female youth are concerned about partners' fidelity; however, sexual infidelity seems to be more acceptable for males than for females.

When asked to discuss expectations for trusted partners, many participants immediately described sexual fidelity. There appeared to be a direct link between fidelity and the seriousness of relationships.

"...If you go out you'll meet so many girls and you'll approach one girl for sex. After having sex you'll leave her. But if it's true love and if you want the girl as your future partner, you'll take care of her and love her deeply, far from these urges (Eritrean male 15-19 years)."

"It means that you know that she can't "double-cross" him. Even if another man proposes love to her, even one that may have more money, she'll refuse and explain to him that she has someone already (Zambian male, 20-25 years)."

"When they say, 'They trust each other' it means that he doesn't have any sexual contact with anyone other than her and the same applies to her too (Eritrean female, 15-19 years)."

Several participant comments indicated that sexual infidelity is more acceptable for males than females. Some male participants added that if men are incapable of remaining faithful to one partner, they should hide their indiscretions so as not to jeopardize their serious relationships.

"For me to show that I love my partner, I shouldn't show that I have other girlfriends. Otherwise, she won't be happy. If I must have another girlfriend, I mustn't make it public (Zambian male, 20-25 years)."

"It might just be a one-night stand, so he must be forgiven (Zimbabwean female, 20-24 years)."

## ***Emotional commitment to relationships***

Participants made a clear distinction between short term and committed relationships. They stressed that youth should seek partners that love them and are concerned about their well being in order to increase the likelihood of having a future together. They also noted that there is a difference between "serious" and "non-serious" partners. Eritrean females especially stressed that males should intend to marry their partners if they engage in sexual relations.

Many participants spoke about love, in terms of how it facilitates trust and solidifies relationships. However, a few participants thought that love and trust are different, equating trust to a fulfillment of monetary and emotional needs.

“I’d like to know if the girl loves me. I should ask her this because I wouldn’t like to love someone who doesn’t love me. If she loves me, then I’ll also be committed to her (Zambian male 15-19 years).”

“If she mentions it to me that she loves me truly and I see it in her eyes then I’m OK (Tanzanian male, 15-19 years).”

“You can see if he trusts you from the way he talks. He comes and tells you that he loves you and that he can’t disappoint you (Zambian female, 15-19 years).”

“As far as I know trust and love are two different things, but if I say I trust my partner it’s because he fulfills, or agrees to fulfill, all of my needs (Eritrean female, 20-25 years).

Most study participants argued that partners who are “serious” about relationships can be trusted while those who seek temporary companionship cannot. Most participants thought it important for partners to reassure each other of their intentions and desire for committed relationships.

“For my side I’d like to know what kind of a relationship (a partner) wants...maybe he wants me to be just a girlfriend and then he leaves me...or (maybe) he wants me to be his lover forever. That will serve me to decide whether I want to make a relationship with this person or not (Tanzanian female, 20-25 years).”

“It’s simple. Just ask her questions - ‘Does she love you? ‘Is she ready to remain with you?’ - that way you can know if she loves you or not (Tanzanian male, 15-19 years).”

Several female participants said that it is important for young women to know that partners are not only interested in sex, but are concerned with establishing long-term commitments. Promises of marriage appeared to be especially important to females in Eritrean and Tanzanian focus groups.<sup>1</sup>

“(I’d trust) someone I love who doesn’t ask me for sex until marriage and someone who works or thinks about my prosperity. I’d dare to say, ‘I trust him’ (Eritrean female, 15-19 years).”

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<sup>1</sup> Note: Moderators and notetakers in Zambia and Zimbabwe reported that youth use the term “marriage” loosely to refer to committed relationships among youth as well as formal matrimonial bonds.

“It’s possible to trust a boy who doesn’t pressure you to have sex with him and if he has plans to marry you (Eritrean female 15-19 years).”

“After he’s paid lobola [dowry] and I decide to have a child I’d trust him (Zimbabwean female 15-19 years).”

Many male participants also spoke of youth’s need to ensure that partners are interested in committed, long-term relationships before they can be trusted.

“If a girl talks about the future and thinks of the future, she’s the one you have to trust and stand by (Eritrean male 15-19 years).”

“I don’t yet fully trust my girlfriend, not until we reach a stage of getting married. We’re still playing around. She still goes to school and I don’t see her often. When we get married I’ll fully trust her. She’ll also trust me when she realizes that I don’t ‘jump around’ [pursue other girls] (Zambian male 20-25 years).”

Participants also pointed out that it takes time to develop relationships and for youth to “get to know” partners well enough to trust them.

“When you say, ‘I trust her’ it means that first you come to know each other at school where you’ve had the chance to have a relationship and if the girl doesn’t date others, you’ll trust her (Eritrean male 15-19 years).”

“When you’re in a relationship and you want to trust your partner, it takes years, maybe two to four, for you to know the characteristics of a person. Then you have to trust him (Zambian female 20-25 years).”

### *Intimacy*

Several participant comments described the need for intimacy in trusted relationships. Respondents spoke of intimacy in terms of understanding each other, showing affection, and feeling close enough to partners to share personal problems. Male and female participants seemed equally concerned about the need for couples to understand one another and share their experiences. Female participants, especially those in Zimbabwe, seemed to think it important for young couples to be affectionate in public in order to demonstrate intimacy.

Male and female participants stated that intimacy is key to establishing and maintaining trusted partnerships. In their opinion, when couples understand one another, relationships become more meaningful.

“... I think when somebody’s saying ‘I trust my sexual partner’ it’s kind of something deep, as in you have to be deep in your relationship. It depends on how intimate you get when you’re with that person. You reach a stage where the



intimacy flows and makes you trust the person, you're comfortable with the person (Tanzanian female, 20-25 years)."

Some female participants, particularly those from Zimbabwe thought that couples should show affection in order to demonstrate intimacy. According to them, kissing, hugging, and holding hands in public demonstrate couples' closeness.

"(A partner) should kiss me in public (Zimbabwean female, 20-24 years)."

"(My partner) hugs me in public, gives me surprises, and we share ideas (Zimbabwean female 20-24 years)."

"(Couples) should walk hand in hand, not walk like brother and sister without holding hands (Zimbabwean female 15-19 years)."

Many participants spoke about the importance of sharing personal problems and concerns with trusted partners. They felt that partners should serve as confidants and offer advice to one another. In their opinion, the ability to share problems with partners and feel comfortable being oneself is essential to establishing trust within relationships. Likewise, participants thought it important for partners to support one another during difficult times.

"As far as I'm concerned, for a boy to be trusted by his girlfriend he has to be frank with her. He doesn't need to act like someone else around her...he has to be himself (Eritrean male, 15-19 years)."

"(Partners) should be there at each other's side through the bad and the good times (Eritrean female, 15-19 years)."

### ***Devotion***

Male and female participants described different ways partners demonstrate devotion to one another. Spending time with partners, giving tokens of one's affection, and feeling a sense of reciprocity within relationships appear to be important for building trust within relationships.

"A (trusted) partner's always in touch with me either through visits, telephone, or letters (Zimbabwean male, 15-19 years)."

"You need to show that you care by buying presents when you come back home from trips, things like cards and visiting her several times (Tanzanian male, 20-25 years)."

Several participants felt that trust should be reciprocated within youth's relationships. In their opinion, if one partner demonstrates trustworthiness, the other should reciprocate. In

addition, partners should do favors for one another and take care of each other's physical and emotional needs.

“For instance, you ask for sex, and if she trusts you she'll accept whatever you say and she'll also respect you. In general, if you trust her she'll trust you in return (Eritrean male, 15-19 years).”

“To show trustworthiness a girl should be able to visit me when I fall sick and even bring me some medicine and food. Then when she falls sick, I'll also go and visit her. So showing trustworthiness in a relationship requires reciprocity in action that can be seen in visiting each other in times of problems like sickness (Zambian male 15-19 years).”

### **Criteria used to determine trustworthiness**

Participants explained that youth use several criteria to determine if a partner or potential partner is worthy of their trust. Below are twelve of the most common criteria participants said they use to help them decide if they should enter into a relationship with someone or if they can trust a current partner. Some of the traits varied mildly either by gender or across countries but a few were dramatically different across groups.

The ten traits that participants appear to evaluate and use as a sort of checklist of partner attributes include:

- ☐ Meeting through family or close friends
- ☐ Passing an informal assessment
- ☐ Exchanging financial support and gifts
- ☐ Dressing appropriately/projecting the right outward appearance
- ☐ Saying the right things/sweet talk
- ☐ Being from the right neighborhood
- ☐ Introducing partners to family
- ☐ Perceiving fidelity within the relationship
- ☐ Keeping appointments/dates
- ☐ Establishing commitment
- ☐ Discussing past sexual activity
- ☐ Testing for HIV

It is important to note that youth appear to evaluate partners on a combination of the first ten traits, rather than relying on just one or two criteria in order to deem partners trustworthy. Although youth use criteria to judge trust, they seem to overlook other criteria that could further decrease their risk for STIs/HIV. For example, most participants reported that if partners test negative for HIV, they would be able to trust them. However, the majority of participants reported that it is rare for youth to ask their partners to get tested, indicating that it is not important to youth's determination of trust. In addition, few participants reported that youth discuss sexual histories with their partners, mostly because they fear rejection, jealousy, or being told lies. From participant

responses, it appears that youth rely on partners' overall performance on the trustworthiness checklist as a substitute for evaluating partners' potential risk for infecting them with STIs/HIV.

While participants discussed things that youth do to determine if they can trust their partners, they also discuss criteria that youth often do not assess, but believe that they should assess, such as discussing past sexual activity and testing for HIV.

### *Meeting through family or friends*

Participants stated that youth often use other individuals (or “emissaries”) to find and introduce them to potential partners. For the most part, partners that youth meet through friends, neighbors, and family members are perceived to be trustworthy. Youth also appear to meet prospective partners at bars, nightclubs, sporting events or school; however, participants noted that partners met in bars and nightclubs are deemed less trustworthy than those met in other venues.

Youth often perceive family members as helpful at finding suitable partners. Participants said that family members generally look out for youth's best interests and are not as likely as peers or neighbors to be biased by friendships with prospective partners. Participants stated that youth are more likely to use family members than friends when looking to establish “committed” relationships.

“You know (sisters) have friends who don't have boyfriends so our sisters find girls and select the suitable ones (for us) (Tanzanian male, 20-25 years).”

“Sometimes, you may be single and your parents may suggest that they can look for somebody from the village that doesn't have AIDS, so that you can get married (Zambian female, 20-25 years).”

“...Aunties normally come into play when one's serious and looking for someone to marry (Zimbabwean male, 15-19 years).”

Participants said that youth value the input of family members because they believe that family members can evaluate potential partners well — either by having seen them grow up or by living within close proximity to them.

“Parents can introduce you to someone whom they know from birth (Zimbabwean female, 15-19 years).”

“Cousins, sisters, etc. introduce us to the girls they see as good girls. These (girls) may be their friends. In other cases, the boys ask their cousins or sisters about their friends who end up introducing (them to each other) (Zimbabwean male, 15-19 years).”

Participants also cited friends as valuable resources in beginning relationships with new partners, especially when family members are not available.

“At places like colleges there are girls who behave like everybody’s aunt. They talk to nearly everyone and are at nearly all the activities. Such girls have influence so you can take advantage and make them facilitators (Zimbabwean male, 20-24 years).”

However, a few participants felt that meeting someone through friends does not guarantee a suitable arrangement. Some male participants reported that they are careful to have only their married friends investigate and approach potential partners because single friends may try and steal girls for themselves. Some females in Eritrean groups explained that youth sometimes feel a great deal of peer pressure to engage in relationships.

“Female friends try to persuade girls to get into relationships and they get into them without clearly knowing the guys’ intentions (Eritrean female, 20-25 years).”

Some participants seemed to judge partners’ trustworthiness based on where they meet. Most participants agreed that people met in nightclubs or bars should not be trusted.

“The place you meet also has an impact. The girl may be innocent, but because you met her there (in a bar) you’ll be (less likely to trust her) (Eritrean male, 15-19 years).”

Although focus group participants discussed meeting people at sporting events, on the street, in school and at parties, they did not appear to place value judgements on potential partners met under these circumstances.

### ***Passing an informal assessment***

Participants reported that youth often “investigate” new or potential partners’ character before beginning relationships. They often turn to the same support group of family members, friends, and neighbors that they use to establish partnerships. Participants reported that youth then make decisions about partners and relationships based on information that informants provide.

“I gather information from neighbors and other people. So, I compare and contrast the two. If the information is consistent I’d continue, if not I’d just end (the relationship) (Eritrean female, 15-19 years).”

“I think (it’s important to) research the girl’s background, finding someone who stays in the same neighborhood with the girl, making friends with that girl. Research her if you’re interested in marrying the girl and want to have unprotected sex with her (Zimbabwean male, 15-19 years).”

Other participants reported that youth prefer to study partners' behavior themselves. Assessing partners' risk for STIs/HIV appeared to occur over a period of time, but not necessarily prior to engaging in sexual relations.

“Observing the girl's movements [indulgence in sex] is also a means of protecting themselves from STIs/AIDS.... Such young people can only start having sexual intercourse after ascertaining that the partner's behavior doesn't endanger or put his life at risk (Zambian male, 15-19 years).”

Some participants reported that youth “test” their partners to determine if they are trustworthy. Some will either ask partners about a situation that they had learned about from other sources while others will watch partners more closely to try and trap them in contradictions or lies. Female participants tended to discuss passive ways of testing partners such as researching their background and asking questions, while male participants tended to discuss more elaborate methods to entrap partners in lies.

“For example, you may test the person with a question that you already know the answer to in a joking manner and if he doesn't falter then you know he's fine, he can be trusted (Tanzanian female, 20-25 years).”

“When you have your darling you should make sure you ask her several questions about her behaviors and conducts. Sometimes you can pretend you saw her with another man...her reaction will make you know a lot (Tanzanian male, 15-19 years).”

“...such as asking her for sex or asking her to drink alcohol. If she accepts these things she's not the one you want for the future (Eritrean male, 15-19 years).”

“Sometimes young people will send their friends to the girl to do a mock proposal and see how she reacts. Then the friend will go back and report what his experience was; whether she gave in or not (Zambian male, 15-19 years).”

Some participants said that youth's information sources are not always truthful or reliable. They attributed this to conflicts of interest that cause investigators to be biased, investigators' own romantic interests in someone, or investigators' inability to provide accurate information.

“When I wanted to marry my wife, I heard stories. Some said she was a widow; others said she was prostitute; I didn't change my mind. Later I realized other women wanted me. So we shouldn't be listening to such stories about our partners, they're mostly fake (Tanzanian male, 20-25 years).”

### ***Exchanging financial support and gifts***

Male and female participants differed in their perceptions of financial exchange in relationships and how important such exchanges are to youth. Female participants said

that young women lend credibility to males who care for their financial needs. Most felt that providing money or gifts is a demonstration of males' affection and trustworthiness.

"She might also trust him if he's a good talker and also if he gives her presents, like a gold necklace or clothes. She may think he's doing this because he loves her (Eritrean female, 15-19 years)."

"(A partner) should give me money to buy whatever I need. He'll have proven that he loves me and that I can trust him (Zimbabwean female, 20-24)."

Male participants, on the other hand, said that females who ask for money and gifts should not to be trusted. They questioned females' intentions for entering into relationships when they ask for money or gifts from partners.

"I also think that a girl who likes money too much isn't good. If you happen to run out of money, you'll lose her to another boy who has money (Zambian male, 15-19 years)."

"I don't trust a girl who asks her boyfriend for money, because she needs money, not love (Eritrean male, 15-19 years)."

### ***Dressing appropriately/projecting the right outward appearance***

Male participants placed more value than female participants on outward appearances as criteria for judging potential partners trustworthy. In general, male participants argued that females who dress "loosely" should not be trusted. They were especially critical of young women who wear western clothes or items that reveal "too much" of their bodies.

"Her clothes shouldn't be short as they lead people to sex, and even her shoes shouldn't make her look like a foreigner (Eritrean male, 15-19 years)."

"The girl I can trust is the one who dresses decently and not the type of dressing that attracts boys...Girls who dress decently are respected unlike those who put on mini dresses (Zambian male, 15-19 years)."

Female participants did not place as strong an emphasis as males on outward appearances as criteria for trust. However, they did express a preference for males who do not dress in western clothing.

"But sometimes the way you dress matters, it tells who you are... but not to a large extent (Tanzanian female 20-25 years)."

"(He) should wear casual dress, not baggy trousers... not one who has his hair done in dreadlocks (Zimbabwean female, 20-24)."

“If your boyfriend wears trendy or very fashionable clothes he’ll be in demand, so we do not want this type of dress (Zimbabwean female, 20-24 years).”

### ***Saying the right things/ sweet talk***

Participants explained how youth use sweet talk to lure partners into trusting them. It appears that although sweet talk does not demonstrate one’s trustworthiness, it can blind youth to partners’ negative aspects. Both genders can use sweet talk either deceptively or honestly.

“He might tell her that he loves her and might give her other signs that he loves her. In this way the girl might say ‘I trust him’ (Eritrean female, 15-19 years).”

“You can see if he trusts you from the way he talks. He comes and tells you that he loves you and that he can’t disappoint you...Then you get carried away and trust him (Zambian female, 15-19 years).”

“If you’re continuously told of love, your vision and reason is blurred. You start building trust so you won’t need to protect yourself (Zimbabwean male, 15-19 years).”

### ***Being from the right neighborhood***

Most participants from Zimbabwe and Zambia said that youth are interested in knowing where prospective partners reside, though not all participants felt that one can judge partners’ trustworthiness by their residence. Some felt that residence may influence one’s character, with youth who reside in poorer neighborhoods or near sex workers being less trustworthy than those from “good” neighborhoods. Some of the reasons that youth evaluate individuals’ trustworthiness according to their residence appear to be based on pre-existing notions of ethnic groups or linked to neighborhoods’ reputations. A few participants reported that youth should not care where partners reside.

“I don’t trust a girl if I’ve seen that the majority of those in the neighborhood where she comes from are not trustworthy (Zambian male, 15-19 years).”

“Where he lives really matters because if you tell me you’re from Mbare I’ll divorce you. All those who come from Mbare aren’t educated or are thieves. You can’t trust these people (Zimbabwean female, 20-24 years).”

“You can’t decide to trust someone or not trust someone because of where he lives (Zimbabwean female, 20-24 years).”

Participants seemed to associate living in the same neighborhood as partners with greater trustworthiness because it allows youth to know their partners well and monitor their behavior.

“I trust a girl who stays in the same neighborhood as me so I can monitor her movements and see how she interacts with people (Zimbabwean male, 15-19 years).”

“(I’d prefer) a neighbor so that I can see his movement because I’m so jealous (Zimbabwean female, 15-19 years).”

### ***Introducing partners to family***

Nearly all participants felt that if youth are introduced to partners’ families then they can be trusted. In their opinion, meeting someone’s family serves dual purposes: it allows youth to know partners better and validates relationships.

“The girl I trust is the one who comes to my house and gets to know my family; one who comes to my house freely, whether my parents are present or not. The same thing applies on my part. If you trust her she’ll also trust you (Eritrean male, 15-19 years).”

“If he introduces me to his parents then I’d start trusting him (Zimbabwean female, 20-24).”

### ***Perceiving fidelity within the relationship***

As discussed earlier in this report, youth appear to place a high value on sexual fidelity. Participants often noted that it is important that partners do not have other sexual partners.

### ***Keeping appointments/dates***

Participants explained that youth sometimes judge partners’ trustworthiness on their ability to keep appointments and arrive on time for dates. In their opinion, such behavior indicates the level of respect that partners have for one other.

“If the person doesn’t come on time for appointments he can’t be trusted (Eritrean female, 20-25 years).”

“If she always shows up when you have appointments and if she’s not demanding for money (she can be trusted) (Tanzanian male, 15-19).”

### ***Establishing commitment***

Participants believed that once partners demonstrate that they are committed to each other, trust is established within a relationship. Establishing commitment usually means that partners are monogamous and intend to marry, or at least remain in a relationship for a period of time. Some participants explained that commitment is assumed after a period of time ranging from a few months to several years.



“He can make me trust him and believe he’s serious by making me his wife. You know that when you’re still informally together you can’t tell if he’s seriously planning anything for your future. So when he decides, it makes you feel safe and confident (Tanzanian female, 20-25).”

“When we get married I’ll have full trust in her. She’ll also trust me because she realizes that I don’t jump around [go after other girls] (Zambian male, 20-25 years).”

“I trust someone after three months of going out together (Zimbabwean female, 20-24 years).”

“(I trust someone) after about two years of knowing each other and living together (Zimbabwean female, 20-24 years).”

### ***Discussing past sexual activity***

There were notable differences in participants’ comments across countries in terms of youth’s willingness to discuss past sexual experiences with partners. Regardless of the country, most female participants believed that young women never discuss their sexual histories and feel that they cannot be truthful with partners about their past experiences. Responses among male participants were less consistent: while most participants from Eritrea and Zimbabwe felt that talking about past relationships rarely occurs between partners, Tanzanian males split on the issue, and Zambian males thought that youth often discuss their past sexual experiences with partners. (This topic is covered in more detail under the section “How Trust affects Sexual Decision-Making.”)

### ***Testing for HIV***

Some participants said that since it is difficult for youth to know whether or not their partners are free from STIs and HIV, both partners should be tested. Most youth agreed that testing negative for HIV would be a good indication that they can trust their partner.

“He should accept to go for a test so that we know our status - if we have HIV or not (Tanzanian female, 20-25 years).”

“One way of developing trust in a girl before and after entering into a relationship is to go for an HIV test (Zambian male, 15-19 years).”

Although most groups discussed the importance of testing, most participants felt that it was uncommon for youth to actually suggest that they and their partners get tested. Other participants felt that testing negative does not necessarily indicate that youth should trust their partners.

“Even after testing you may know that you don’t have HIV and you trust each other, but how about his behaviors? Not having HIV/AIDS doesn’t mean trusting each other! (Tanzanian female, 15-19 years).”

## **Types of individuals that can be trusted**

Participants placed youth into groups that can and cannot be trusted according to key attributes and behaviors. Most participants said that youth that can be trusted come from good families, are well respected in the community, are religious, do not drink, avoid bars and nightclubs, and are sexually faithful. Male participants added that virgins can be trusted. According to participant comments, it appears that partners that youth cannot trust lack the traits of those that they can trust.

Participants described youth’s general suspicion about the opposite sex and their intentions when entering into relationships. They added that, for the most part, youth are unwilling to base trust on a few characteristics, but seek a combination of traits in partners.

### ***Religious***

For the most part, participants believed that religiosity elevates the trustworthiness of potential partners, usually by teaching “proper” behavior and chastity. However, few participants felt that youth can base their trust in partners solely on religiosity.

“I can trust someone who goes to church. They’re taught from the Bible to abstain from sex before marriage (Zambian male, 15-19 years).”

“(I trust) churchgoers because they don’t sleep around (Zimbabwean female, 15-19 years).”

Some participants reported that youth could be religious and still not trustworthy. In general, participants believed that youth use church activities as an excuse to socialize and meet partners. Participants also thought that some youth attend church in order to “hide” risky activities or find partners that they believe are safe from STIs and HIV.

“She can pray, but she may secretly have many sexual partners (Eritrean male, 20-25 years).”

“Many people that go to church enjoy attending overnight prayer meetings or choir practices. At these functions they meet with their boyfriends. (If you go) you’re likely to find that your girlfriend is also the choirmaster’s girlfriend (Zambian male, 15-19 years).”

“In church there are some people who have been playing around. They go to church pretending to be decent, to deceive some girl who doesn’t know his

background. He'll marry her. Just because she thinks everyone in church (can be) trusted (Zambia female, 20-24 years)."

### ***Virgins***

The majority of male participants thought that many young men seek female partners who are virgins because they believe that they can be trusted. They reported that virginity is the only indicator of females' trustworthiness that young men feel that they can verify. Some male participants added that young men believe that they cannot trust females who give in too easily to their sexual advances. In their opinion, females who acquiesce too easily are "promiscuous" and have, most likely, engaged in sexual relations with other partners. Again, while male participants used virginity as an indicator of a partner's trustworthiness, few reported that youth can trust their partners based solely on virginity.

"I won't trust her if the first time we meet I find that she's not a virgin. If her virginity's intact, I'll always trust her (Tanzanian male, 20-25 years)."

"I once had a girlfriend who took long, before she gave in to my advances — about one week... Yet she gave in. I trusted her. (Zambian male, 15-19 years)."

While virginity was a common theme for male participants, female participants did not discuss male virginity as a criterion for trust, but reported that young women feel a great deal of social pressure to remain virgins. Female participants reported that trustworthy males are those that respect females' virginity and do not pressure them to engage in sex. Female participants from Eritrea reported that males often test females' conviction to remain virgins as a way of gauging their trustworthiness. According to participant responses, the importance of remaining a virgin seems to be greatest in Eritrea.

"She'll be isolated if she violates the norms of virginity and has children before marriage (Eritrea female, 15-19 years)."

"In my opinion if I'm to trust him, he must respect my virginity (Eritrean female, 15-19 years)."

### ***From a good family***

Most participants said that youth are interested in knowing about potential partners' families. In their opinion, potential partners' trustworthiness is linked to families' reputation since parents' behavior usually indicates the way partners will behave. Most male participants reported that young men prefer partners who are brought up in strict families because they believe that females raised in such an environment are more likely to behave properly and obey them.

"You have to look at his family. He must come from a decent family, that'll make him okay (Tanzanian female, 20-25 years)."

“For example, the mother may go out drinking and sleep around. If you married such a woman’s daughter, she’s bound to behave like her mother (Zambian male, 15-19 years).”

### ***Employed***

Participants reported that youth are more likely to trust partners who hold jobs than those who do not. They explained that youth with jobs are considered to be responsible, respectable, and less likely to engage in undesirable behaviors. Despite their preference for employment, youth seem to believe that certain jobs can threaten partners’ trustworthiness, especially those that expose them to temptations.

“(I’d trust) someone who has a job because he’ll be less likely to get involved in bad things because he won’t have any spare time (Eritrean female, 15-19 years).”

“If he’s a singer, a musician, or a sports person he can’t be trusted because he’d encounter too many women through his job (Eritrean female, 20-24 years).”

“She shouldn’t be a secretary because if she works too close to her boss, business communication becomes personal communication and social distance becomes difficult to maintain (Zimbabwean male, 20-24 years).”

### ***Educated***

Many participants thought that higher levels of education can make potential partners appear more trustworthy and desirable. Participants explained that youth associate education with dedication and good character. They also seem to feel that educated partners are more likely to know how to prevent STIs and unwanted pregnancies. A few male participants felt that females learn how to be faithful and love their partners in school. However, some male participants claimed that young men do not want their partners to have a higher level of education than themselves because they could become dissatisfied with relationships and leave them.

“He should be educated, at least a Teachers Training Institute graduate if not a university student (Eritrean female, 20-25 years).”

“Those girls who are educated can be trusted because they know about safe sex and can advise you to use condoms. Those who are uneducated are ignorant of the dangers of having unprotected sex (Zambian male, 15-19 years).”

“I say uneducated (is more trustworthy) because if she’s educated she can look for alternatives. If she finds someone better, she can dump you (Eritrean male, 15-19 years).”

### ***Avoid alcohol, bars and nightclubs***

Participants reported that youth are less likely to trust those who drink alcohol or go to nightclubs. They explained that when young people drink, they are less likely to control their sexual urges. Male participants felt that if females spend too much time in bars or nightclubs, other men may take advantage of them. They also felt that nightclubs and bars often serve as a base for prostitution or a haven for promiscuity.

“If you see a woman who drinks, if she’s always in bars with men drinking alcohol, then you know she isn’t OK. Don’t follow her, she could be dangerous (Tanzanian male, 20-25 years).”

“People who drink beer or alcohol may disturb their reasoning power and control, and may end up having unprotected sex with anyone they meet (Zimbabwean male, 15-19 years).”

“I can’t trust a girl who goes to drinking establishments. Men are a problem when they’re drunk, they want to sleep with anyone they see in a dress (Zambian male, 15-19 years).”

“At these bars there are sex workers who just come around for a ‘short time.’ Within an hour, she’d have slept with 10 men (Zimbabwean male, 15-19 years).”

### **How Trust affects Sexual Decision-Making**

Focus groups included discussions about the effect trust has on STI/HIV risk perception, sexual decision-making, general sexual behavior, and condom use. In general, participants agreed that youth have difficulty personalizing their risk for infection and exploring partners’ sexual histories. They confirmed that condom use among young couples remains low despite high levels of awareness about STIs, HIV, and the general perception that youth are at elevated risk for infection.

Differences in participant comments were more apparent across gender lines than between countries. Females appeared to be concerned about being labeled “promiscuous” while males tend to de-emphasize their experiences with casual relationships. Males appear to rely on partners’ outward appearances in order to determine risk for STIs/HIV, much like they do when evaluating partners’ trustworthiness. Study participants also thought that male youth are generally impatient when it comes to gratifying sexual urges, so they engage in high-risk activities before accurately gauging the likelihood of contracting STIs or HIV.

### ***Perception of risk for STIs and HIV***

In general, it was apparent from participants’ comments that even though youth understand that they are at increased risk for STIs and HIV, few personalize their risk for infection. In their opinion, youth are reckless when it comes to sexual behavior,

demonstrating high levels of sexual activity and partner change. Participants, particularly males, explained that trust “blinds” youth from seeing their increased risk for infection. In addition, young people appear to use unreliable cues to assess risk. Two cues used are obtaining information from others about partners’ sexual fidelity and assuming that one can determine whether or not partners are at risk for STIs and HIV by their physical appearance.

Most participants agreed that youth demonstrate high levels of sexual activity and engage in reckless behavior that puts them at increased risk for STIs and HIV. They noted that young people, especially males, pursue a number of different sexual partners and hope to engage in sexual activity early in relationships.

“Personally I say life’s important, but to enjoy life one has to have relationships and it’s what happens in these relationships that affects our lives (Zimbabwean male, 15-19 years).”

“Boys like myself are at risk (for STIs and HIV) because we don’t want to listen and we like girls a lot. Older people that are alive today are there because they chose the right path and refrained from liking girls too much (Zambian male, 20-25 years).”

Some participants pointed out that youth sometimes justify risk behavior despite knowing that youth are at risk for infection.

“Any person in any age group can be infected but as young people we fool ourselves into thinking that some of us don’t have any infections (Zimbabwean male, 15-19 years).”

Some male participants in Zimbabwe explained that youth assume that trusted partners are free from HIV while others, especially one-night stands or those met in nightclubs, are at increased risk for infection.

“(Trust) means that the girl’s honest and loyal, loves me, and doesn’t love anyone else. One then assumes that the girl’s HIV free (Zimbabwean male 20-24 years).”

“It depends on where you pick up the girl. People who choose nightclub girls are more afraid of the disease than pregnancy, so they use condoms (Zimbabwean male, 20-24 years).”

Other respondents admitted that trust and love can cause youth to misjudge their increased risk for STIs and HIV infection.

“It’s the love that she gives you that presents a cloud so that you don’t think much about AIDS (Zimbabwean male, 20-24 years).”

“...Sometimes if the boy tries to make the girl trust him, he uses sweet language and the girl will trust him (due to) her feelings for him. Then if he asks her to have sex without condoms, she’ll trust him and do it, forced by her feelings (Eritrean male, 15-19 years).”

Male participants pointed out that youth rely on outward appearances to gauge risk, much like they do to determine the trustworthiness of a partner. A few explained that youth sometimes rely on information from others or their “investigations” to gauge the risk partners pose for STIs/HIV.

“This is because we look at the physical appearance of a girl and say to ourselves that this girl can’t be infected (Zambian male, 20-25 years).”

“It doesn’t matter if you trust her or not, it depends on how she looks, if she’s beautiful, you may not be able to use your condoms (Tanzanian male 20-25 years).”

“The girl I can say I trust is one whose behavior and character I know through asking her neighbors or her friends before talking to her. She’s one whose movements I know. If I learn that she has good character she doesn’t often fall sick then she doesn’t jump around [isn’t promiscuous] (Zambian male, 20-25 years).”

### ***Learning about partners’ sexual history***

Participants agreed that learning about partners’ sexual history is important; however, they acknowledged that this rarely happens. They explained that youth feel that they cannot be completely open with one another without jeopardizing relationships. The priority given to relationships and the resulting lack of discussion appears to hinder youth’s personal risk perception for STIs/HIV. From participants statements, it seems that there are rules about the extent to which youth can discuss details of their sexual history and that too much curiosity can imply either one’s own promiscuity or suspicions that a partner is promiscuous. Participants stated that even though youth want to know about the emotional shortcomings of previous partnerships, they do not want to learn details about partners’ sexual escapades for fear that such knowledge could undermine trust and lead to separation. Females appear to be especially concerned about being labeled as “promiscuous,” while males are careful to share details about “serious” relationships and not casual partnerships, such as those with commercial sex workers (CSWs) or one-night stands.

Several participants thought that youth should discuss their sexual histories with partners in order to make informed decisions about sexual activity and condom use, though they acknowledged that this rarely happens. If discussion does take place, youth appear to censor the content and provide as few details as possible. Most youth from Eritrea, Tanzania, and Zimbabwe felt that talking about past relationships is largely stigmatized. Regardless of country, most females appeared to believe that they never discuss sexual

histories with partners and that partners usually do not tell the truth when the topic is broached.

“Asking about his past partners? That’s impossible, he won’t tell you and so we don’t ask (Tanzanian female, 20-25)!”

“If you ask, he could never tell you the truth but if you ask friends, they could tell you he got sick with an infection (STI) (Zambian female, 15-19).”

Only male participants from Zambia seemed to think that youth discuss sexual history often.

“With this disease [AIDS], I’d say that it’s extremely important for all young people to ask and investigate about the past of their partners to be sure they’re moving into safe relations (Tanzanian male, 20-25 years).”

“Yes we do discuss (sexual histories). We ask girls about their former relationships but we don’t ask too much because you may become angry and destroy the relationship (Zambian males, 20-25 years).”

Youth also seemed to feel more comfortable discussing past partners rather than details about sexual activity or condom use.

“Before I start a relationship, I have to find out about his ex-girlfriends and why they broke up and when they stopped dating (Zambian female, 20-25 years).”

“We normally talk about previous partners as soon as we fall in love, but we don’t go as far as asking about sexual experiences (Zimbabwean male, 15-19 years).”

Participants pointed out that one should not share too much information about past partners for fear of violating trust. In their opinion, too many questions could cause current partners to become jealous, feel insecure, or want to end relationships.

“If you begin to ask her about her previous boyfriends and condoms, she’ll ask you, ‘What do I look like? Do I look like I’m sick or what?’ (Zambian male, 20-25 years).”

A few participants thought that sharing too much information about one’s sexual history could make partners fearful about their risk for STIs/HIV and prompt them to end relationships.

“You can’t know if they used condoms or not. She can’t tell you if they didn’t use a condom for the fear that you might end the relationship. You’ll think that she could be infected (Zambian male, 15-19 years).”



“Boys don’t talk about their sexual partners because if they have multiple partners the girl may break up with him, as she may be scared of contagious diseases (Eritrean female, 15-19 years).”

In addition, it appears that youth underreport their number of past partners when discussing sexual histories with current partners. Male participants explained that females underreport their partners so that they will not be labeled as “promiscuous.” Female participants, on the other hand, explained that males tend to provide details only about “serious” partners, not casual partners.

“It’s difficult for the girl to tell you the exact number of her former boyfriends because she’s afraid that you’ll think that she’s promiscuous (Zambian male, 20-25 years).”

“Boys don’t tell the truth about one-night stands or sex workers because they know that if you know this information, you’ll leave them (Zimbabwean female, 20-24 years).”

Female youth appear reluctant to talk about past condom use with partners for fear of being perceived as “loose” and untrustworthy. Participants explained that male youth will not reveal details about past condom use because they do not use them with regular partners and they do not talk openly about casual partnerships.

“You can’t know if they used a condom or not unless she tells you. However, she’d refuse to tell you because she fears that you’ll think she’s promiscuous (Zambian male, 15-19 years).”

“If he had a serious relationship, he’ll admit that they didn’t use condoms, but as we said, you’ll never be told about the casual partners and whether condoms were used (Zimbabwean female, 15-19 years).”

Not only do participants appear to believe that youth are unwilling to share details about their sexual history, most seem reluctant to learn too much about partners’ past experiences. Participants explained that some youth would rather ignore the past for fear of knowing too much.

“In fact in some cases, men would know that her partner died of HIV/AIDS. If she continues to stay and she looks healthy and OK, then they start saying, ‘It wasn’t that thing [AIDS],’ so they continue with her! They could say that it was tuberculosis or some magic (Tanzanian male, 20-25 years).”

“...Sometimes you love a person sooo much that you don’t want to hear anything (bad). With that person you don’t ask anything, even if somebody says something about him, even if they say he has AIDS (Tanzanian female, 15-19 years).”

Discussion about previous exposure to STIs/HIV seemed off limits for most youth. According to participants, youth can be very secretive about their past experiences with STIs and are usually unwilling to tell current partners if past partners may have been infected with HIV. Telling partners about past exposure to STIs and HIV appears to indicate a violation of trust and can end relationships. Most participants spoke about the stigmatization attached to STIs and HIV and explained that youth are unwilling to risk becoming infected if they know about partners' previous exposure.

“There are very few cases where people would tell anyone about sexually transmitted diseases. The chances of this are very slim. Only those who've lost hope of getting into a relationship that'll lead to marriage would admit to having had one (Zimbabwean male, 15-19 years).”

“A girl won't just tell you about such things because telling you that any of her past partners was infected (with HIV) would be as good as telling you that she's also infected (Zambian male, 20-25 years).”

“The way we know men, if you honestly tell them that you had problems in the past, like getting an STI, they'll never trust you. They may even drop you, so what do you do if that happens (Tanzanian female, 20-25 years)?”

Participants explained that some youth, especially males, wait until after they have had sex with partners to ask about sexual histories. They pointed out that young men might feel more at ease sharing and hearing such information once they have established trust within relationships and feel comfortable with their partners. Other participants said that young men are often in such a hurry to have sex with partners that they accept the potential risk for STIs/HIV and ask about sexual histories later.

“Many girls don't talk about their past partners. They'll talk about it only after you've had sex with them twice or three times. Only then will the boy begin to ask more about the girl's previous partners (Zambian male, 20-25 years).”

“The best time to find out a lot of things about her is when you've started to make love - now you can easily ask her (Tanzanian male, 20-25 years).”

“If a woman's shaped properly, she makes you crazy and you don't take trouble to countercheck you simply say 'yes' and proceed (Tanzanian male, 20-25 years).”

### ***Condom use***

Although participants recognized that condom use is an effective means of protection against STIs and HIV, they admitted that most youth do not use condoms, especially with trusted partners. Respondents spoke of the need to use condoms with “promiscuous” partners such as CSWs or one-night stands. They also pointed out that youth generally use condoms during the early stages of relationships, but abandon them after some time.

Suggesting condom use can indicate a lack of trust in partners and jeopardize relationships. Some participants suggested that youth negotiate condom use under the guise of pregnancy prevention, instead of STI/HIV protection, to avoid offending sexual partners.

As a general rule, participants thought that youth should use condoms to protect themselves from STIs and HIV. They noted however, that most youth do not use condoms, especially with trusted partners.

“Even if (youth) have just one partner who they trust, they’ll still make mistakes when they’re young, so in order to be safe, they have to use condoms (Eritrean male, 15-19 years).”

“I can’t use condoms with my present girlfriend. I like her very much and we have sex without condoms. One day, she disappointed me because I found her with another boy. After reconciliation however, I’ve continued having sex with her without using condoms. This is because I still love her very much (Zambian male, 15-19 years).”

Participants pointed out that youth are more likely to use condoms with casual than trusted partners.

“Condoms are only used against disease with casual partners, prostitutes, and one-night stands since the relationships are not serious (Zimbabwean male, 20-24 years).”

“You use a condom with a partner who you know has been promiscuous, or if you know that one of his old girlfriends is sick [with AIDS] (Zimbabwean female, 20-24 years).”

Respondents added that if condoms are used with regular partners, they are only used for a period of time, usually until trust is established or partners feel as if they “know” one another well. After that, youth abandon their use.

“The first time that you’re going to have sex, you’re going to use condoms. For the subsequent times, you aren’t going to use condoms (Zambian male, 20-25 years).”

“Some men will tell you up front before they go out with you that they’ll be using condoms. So that along the way, they’ll be able to observe whether you’re honest or not (Zambian female, 15-19 years).”

Participants emphasized that proposing condoms can insinuate a lack of trust in partners. As a result, most youth are reluctant to suggest their use once trust has been established. In their opinion, proposing condom use can suggest promiscuity, infidelity, suspicion, or infection with STIs or HIV.

“The girls refuse to use condoms because they say, ‘You don’t trust me because you think that I’m promiscuous’ (Zambian male, 15-19 years).”

“(Male partners) can say all sorts of things to make you feel guilty. (It’s) as if you’re committing a crime by insisting on condom use (Zambian female, 15-19 years).”

“My girlfriend once found me with condoms and she terminated our relationship immediately. Why do girls behave this way (Zambian male, 15-19 years)?”

“If he uses condoms, I’ll wonder why and I’ll be suspicious about how many partners he’s had or whether these partners have got AIDS (Zimbabwean female, 20-24 years).”

They also noted that when condoms are used with trusted partners, they are usually used for pregnancy prevention. Some participants suggested that youth propose using condoms as a means of pregnancy prevention rather than STI/HIV protection in order to avoid violating trust and offending partners.

“Condoms are only used with a regular partner to prevent pregnancy, not diseases (Zimbabwean males, 20-24 years).”

“At times it’s easy to talk about condom use as a way of preventing pregnancy, but the moment you talk about (using them for) disease prevention you risk losing your sexual partner (Zimbabwean male 15-19 years).”

### ***Discontinuing condom use***

Although most participants agreed that few youth use condoms in trusted relationships, they listed factors that are linked to discontinuation of use and establishment of trust. Respondents described how youth usually abandon condom use after feeling that they “know” their partners well, spending time in relationships, feeling reassured that partners are sexually faithful, and confirming trust through further “investigations.” They also explained that discontinuing condom use can indicate an advancement in relationships to more serious levels, especially consideration of marriage. It appears that some youth feel assured that partners are HIV negative when they either get tested or show no signs or symptoms of infection over time.

Some participants pointed out that some youth believe that trust is the only form of protection they need against STIs and HIV. Many explained that youth presume that they do not need to use condoms with trusted partners or partners that they love.

“The key to protecting yourselves from sexual diseases and HIV is to trust each other. If you trust each other, you don’t need any means of protection (Eritrean male, 15-19 years).”

“If you trust him and have a solid relationship you won’t use condoms (Zimbabwean female, 20-24 years).”

“(Discontinuing condom use) should only happen after you marry, but usually you just tend to stop using condoms when you love your man ...There’s no fixed time period when this happens. It all depends on love and love has no time attached to it (Zimbabwean female, 20-24 years).”

Some participants, however, felt that condoms could be abandoned once trusted partners have spent time in relationships or after they have had sex a couple of times. Appropriate lengths of time ranged from one week to a few years.

“It depends on the length of time you’ve been together. If you’ve been in a relationship for a long time, about three months, then you can stop using condoms (Zambian male, 20-25 years).”

“But if you have a girlfriend, you know her background, you trust her, and you’ve been together for about three to four years then it won’t be necessary (to use condoms) (Eritrean male, 15-19 years).”

“I’ve seen most of my friends contracting sexual diseases because they don’t use condoms consistently. They may use a condom the first time, second time and third time (that they have sex). Afterwards they develop trust and stop using condoms (Zambian male, 20-25 years).”

A few participants revisited the topic of investigating partners’ behavior, but with an eye to their sexual behavior. They explained that some youth believe that they can determine the faithfulness and “safety” of partners by asking others for information or observing partners’ sexual behavior over time. In their opinion, if partners appear faithful, hence trustworthy, one can abandon condom use. Participants also thought it important for youth to confirm partners’ sexual fidelity before abandoning condom use. Assurance may come with time or by proposing a discontinuation of use.

“There has to be a long period of time in a relationship, say five months or even a week, for you to study your partner. Then you can stop using condoms (Zambian male, 15-19 years).”

“Normally we use condoms while studying (partners’ behavior). If you’re satisfied that he’s OK, you can start (having sex) without condoms (Tanzanian female, 20-25 years).”

“If there’s no suspicion that the partner’s being unfaithful, they may decide to stop using condoms as a way of showing that they’re faithful to each other (Zambian male, 20-25 years).”

Several participants explained that abandoning condom use can indicate progress in relationships and demonstrate that partnerships are serious. Trust appears to mark an emotional turning point within young couples' relationships, a point at which condom use becomes unnecessary. This is especially the case when youth believe that they will marry their partners.

“(Those who stop using condoms) are the ones who’ve decided to get married. Those who’ve been together for a long time can also decide to stop using condoms because they trust each other (Eritrean male, 20-25 years).”

“As long as he’s paid lobola [dowry], even after one week of knowing each other you can throw away the condom (Zimbabwean female, 20-24 years).”

While some participants argued that youth should be tested for HIV before abandoning condoms, others pointed out that many youth presume that partners are HIV negative when they do not show signs or symptoms of AIDS over time. A few participants added that youth should not discontinue condom use until they are prepared to take responsibility for the consequences of engaging in unprotected sex.

“I think the big problem is that when you start (having sex) you’ll use them. After some months you decide to believe that she’s OK and so you stop using condoms even before you’ve tested your blood! It’s a big mistake, people should test their blood first (Tanzanian female, 20-25 years).”

“Some people stop using condoms because they feel and also see that their partners are healthy. If your girlfriend looks very healthy throughout the relationship you can trust that person and would even stop using condoms. Unlike the case where she’s very sickly, you can’t risk your life by going in live [without a condom] (Zambian male, 15-19 years).”

“Both of them will agree to stop using condoms when they’re ready to take full responsibility for whatever happens, like pregnancy, and when they’ve had a medical check that assures them that they’re free from STIs (Eritrean male, 20-25 years).”

## **Violations of trust and how breaking trust affects relationships**

Participants reported that partners could do several things to violate trust and jeopardize relationships. They believed that youth lose trust in partners when they are unfaithful, infect them with STIs, or behave differently than before. Female participants also said that male partners violate one’s trust if they fail to accept responsibility for pregnancies. Respondents stated that youth are unlikely to remain in relationships with partners who break their trust. Rather than minimizing risk by adopting safer behavior with current partners or transporting safer behavior into new relationships, youth appear to repeat a cycle of trust and broken trust, without adopting sustainable risk reduction methods.

### ***Infidelity and infection with STIs***

Infidelity represents the most serious violation of trust among young couples. Although participants spoke a great deal about sexual infidelity, they explained that being unfaithful can include being attracted to, flirting with, or dating others. Participants in Eritrea, Zambia, and Zimbabwe discussed the effect that partner's infidelity has on relationships. In Tanzania, both male and female participants discussed the effect that male infidelity has on relationships, but rarely mentioned female infidelity.

“If he's sexually attracted to other girls she won't trust him anymore (Eritrean female, 15-19 years).”

“It would break my trust if I see her with other boys and I can tell that they're going out (Zimbabwean male, 20-24 years).”

Some participants reported that partners who infect them with STIs cannot be trusted. They did not appear to make a distinction between STIs acquired before or during current relationships.

“If she infects me with an STI then I'd stop trusting her and would never trust her again (Zambian male, 15-19 years).”

### ***Behaving differently***

Several participants reported that if partners begin to behave differently, trust can be broken within relationships. Behaving differently can include adopting new vices, acting less affectionate, and treating partners poorly. Participants explained that when partners expose behaviors that were previously unknown, such as smoking or drinking, youth reevaluate trust. Male participants seemed most concerned with changes in partners' sexual behaviors, such as asking to use condoms, while female participants were most concerned with changes in how partners treat them.

“If he used to treat her well, but he starts to treat her badly she'll lose trust in him (Eritrean female, 15-19 years).”

“I'd stop trusting my partner if I discovered some behaviors she never told me about when we started going out. Suppose she never told me that she drinks or smokes, but I discover it on my own — then I'll have reason to stop trusting her (Zambian male, 15-19).”

### ***Rejecting pregnancies***

Some female participants said that if male partners fail to take responsibility for unplanned pregnancies, they can violate partners' trust. This issue seemed to be of increased concern for females in Eritrea, Zambia, and Zimbabwe. A few participants

from these groups noted that if males fail to take responsibility for former girlfriends' pregnancies, current partners might also question their trustworthiness.

“Trust will be broken if when they have sex she gets pregnant and he rejects her (Eritrean female, 15-19 years).”

“(He’d lose my trust if) he gets you pregnant and refuses responsibility (Zambian female, 15-19 years).”

### *Consequences of broken trust*

Participants reported that when trust is broken, youth usually end relationships immediately rather than try to resolve issues over time. This especially appears to be the case when partners are suspected of sexual infidelity. Participants explained that some youth recognize that staying in relationships with promiscuous partners can put them at risk for contracting STIs or HIV. Others feel that trust serves as the foundation for relationships and once it is violated, it cannot be restored. Some female participants argued that young women sometimes feel trapped in relationships by families' expectations or they feel an obligation to continue relationships when they have received money or gifts from partners. Only a few participants said that youth would remain in relationships and adopt risk-reducing behaviors, like condom use, after a violation of trust.

Almost all participants said that it is difficult for partners to recover from a violation in trust and most youth prefer to end relationships. They added that once youth abandon relationships, they usually start new relationships within a short period of time.

“Since trust is what a relationship’s all about, the relationship would come to an end if the trust’s lost (Eritrean female, 20-24 years).”

“...Every time our girlfriends disappoint us, we drop them and look for other partners (Zambian male, 20-24 years).”

A few female participants reported that if they end relationships, their families will sometimes intervene in order to bring the couple back together. A few female participants reported that it can be difficult to end relationships if they cannot return gifts and money provided by partners.

“My partner slept with our landlady last year. When I discovered that, I left him. I stayed with my parents for six months but my parents solved that, he promised it wouldn’t happen again (Tanzanian female, 20-24 years).”

“They usually want everything back that they gave you if you divorce. This would be an embarrassment (Zimbabwean female, 20-24 years).”



Some participants explained that males often expect female partners to forgive them for their sexual indiscretions and violations of trust. Males, on the other hand, appear to be less forgiving of female partners' mistakes.

"Boys will usually plead with the girl, and I mean plead really hard. If she insists that your relationship is over, he'll run into a shop, buy her some chocolates, and take them to her home (Zambian male, 15-19 years)."

"If she tells you (that she was unfaithful), then you should drop her (Tanzanian male, 20-25 years)!"

While most participants said that youth end relationships when partners break their trust, a few reported that some youth adopt sustainable risk-reducing behaviors such as abstaining from sex or reintroducing condom use.

"They must use condoms because he has broken her trust. I'd say that she could even abstain from sex (Eritrean female, 15-19 years)."

"If you were double-crossed or you find him having sex with another girl, you might stop being sexually active. People only usually learn their lessons after the event, not before (Zimbabwean female, 20-24 years)."

Only a few female participants said that young women insist on condom use after partners display infidelity and break trust. They said that young women would insist on condom use in order to minimize their risk for STIs and HIV infection. Participants added that insisting on protective behaviors such as condom use can push partners away and end relationships.

"(If he's unfaithful), we'd use condoms for three months to see if he starts looking ill or gets an STI (Zimbabwean female, 20-24 years)."

"Sometimes you aren't aware that you're telling him, 'We should use condoms' and you start pushing him away just because you don't trust him (Tanzanian female, 20-25 years)."

### ***Future sexual decision-making***

Participants did not report that a break in trust would affect decision-making with youth's future relationships. They seemed to attribute violations in trust to partners' character flaws rather than indicators that relationship terms and expectations should be renegotiated. For the majority of youth, it appears that negative experiences with past partners do not translate into a reevaluation of personal risk for STIs/HIV or sustainable behavior changes with future partners. Rather than minimizing risk by adopting safer behavior with current partners or transporting safer behavior into new relationships, youth appear to repeat a cycle of hope and broken trust without sustainable risk reduction for STIs and HIV.

## Conclusions

This study provides insights into youth's conceptualization of trusted relationships as well as how trust affects STI/HIV risk perception and sexual decision-making. Trust it appears, is a foundation for partnerships and marks a milestone in relationships between youth. Despite recognizing that they are at increased risk for STIs/HIV, youth have difficulty personalizing their risk for infection and often use ineffective criteria to evaluate their risk within trusted relationships. Many youth also adopt trusting one's partner as a risk reduction strategy to the exclusion of more effective methods, such as getting tested for HIV or incorporating condom use into relationships.

Youth rely on surface-level criteria, such as appearance and reputation, to evaluate the trustworthiness of their sexual partners. They appear to use a checklist of traits in order to gauge their safety within relationships rather than evaluating other factors, such as sexual histories or HIV testing. They also rely on "investigations" or information from others to determine potential partners' trustworthiness.

Emotional commitment, love, and sexual fidelity are essential to establishing trusted partnerships. Such an emotional investment can blind youth to their risk for STIs/HIV and render them unwilling to explore partners' sexual histories for fear of jeopardizing relationships. As a result, they are less able to ask partners about their previous partners, condom use, and exposure to STIs/HIV. Even though they may be curious about the emotional shortcomings of previous partnerships, they are reluctant to learn too many details about partners' past for fear that such knowledge could undermine trust and lead to break ups.

While risk behaviors for STIs and HIV infection within trusted relationships are common, youth do not appear to take effective preventive measures. Participants explained that sex usually occurs early within relationships and if condoms are used, they are used at the beginning of relationships, perhaps before trust is confirmed. Since youth associate condom use with a lack of trust in one's partner, use remains low within regular partnerships; however, when used with trusted partners, youth appear to negotiate condom use for pregnancy prevention rather than protection from STIs/HIV.

Infidelity represents the most serious violation of trust and usually results in the end of relationships. A common theme across all focus groups was youth's inability to learn from past experiences and apply them to future sexual decision-making. Instead of adopting a sustainable risk reduction method, such as condom use or HIV testing, youth appear to repeat a cycle of trust and broken trust with a series of different partners.

Study results indicate that sexual satisfaction, emotional fulfillment, and fear of loss override youth's risk perception for STIs/HIV and contribute to a pattern of denial. Rather than using appropriate criteria to evaluate their risk for STIs/HIV, youth rely on trust as protection from infection. Even when trust is broken, they do not apply lessons

learned from past experiences to new relationships, repeating the same scenarios of infidelity and exposure to STIs/HIV.

## **Programmatic Implications**

Although much of this research focused on condom use, several other types of behavior change interventions are appropriate for addressing the barrier trust can play in youth's perception of risk for STIs/HIV.

This study demonstrates that youth's beliefs about their partners, and the partner selection process generally results in inappropriately low self-risk assessment for STIs/HIV. This, in turn, contributes to behaviors that are likely to lead to HIV infection. As a result, it is critical that communications programs aimed at preventing new infections among youth address the problem of trust as it relates to low risk perception for infection. We believe there are three essential components to such a strategy.

First, youth must understand that partners' trustworthiness and character are independent of their serostatus. In short, "bad things happen to good people," and in generalized epidemics many good, upstanding and trustworthy people are HIV positive. Although a checklist may help youth select a good partner, unprotected sex with this or any other person must be perceived as risky.

Second, youth must personalize this understanding: "good people who become HIV positive do not just come from other communities," but they are friends, neighbors and potential partners, or youth themselves. It is likely that interpersonal communication campaigns or other community-level activities will help achieve this personalization of risk.

Third, although achieving a new level of personalized risk perception among youth will be challenging, channeling this new knowledge into appropriate behaviors will require the creation of new social norms. Existing social norms result in several forms of risk behavior: irregular condom use; limited knowledge of serostatus due to low use of voluntary counseling and testing (VCT) services; and relatively low levels of abstinence or delayed sexual debut. In addition to communicating new and appropriate levels of personal risk assessment, programs should strive to achieve broad social support, if not pressure for, consistent condom use, knowledge of one's own HIV status ? as well as that of all partners ? and delay or reduction of sexual activity where possible.

## **Challenges**

As with all studies, this project faced some limitations that must be taken into account when analyzing data and drawing conclusions from results. Specifically, the shortcomings of this study can be attributed to time allowed for data collection, consistency in data quality across countries, transcription quality, methods for recruitment, information bias, and the challenge of conducting research in a multi-country setting.

Given that data were collected in four countries within a short amount of time, the authors of this report were unable to be present during data collection. In addition, the quality of transcripts varied across countries since moderator skill levels and translating and transcribing capacities were different in each context. Collecting data in local languages also presented a challenge: although it can facilitate discussion during focus groups, it adds more time to transcription and presents the challenge of deciphering local terms and colloquial phrases.

In a few cases it was difficult to interpret transcripts due to the omission of participant identifiers and a lack of detail for some responses. Some transcripts did not identify participant responses, making it difficult to follow individuals' responses throughout discussions and the consistency of dialogue between participants. In some cases, moderators failed to ask appropriate follow-up questions or probes that could have leant more detail to transcripts. Likewise, few moderators challenged participants who provided contradictory statements.

As with most research on sexual activity, one must recognize that participants may have provided socially appropriate responses to impress moderators or appear knowledgeable about STIs, HIV, and methods for risk reduction. Likewise, participants may have provided responses they thought would impress other members of the group, resulting in information bias that can affect study results.

Challenges were present during participant recruitment, especially in Eritrea. Due to the conservative nature of Eritrean culture and the reluctance of many youth to discuss issues surrounding relationships and sexuality, researchers were obliged to recruit youth from the National Union of Eritrean Youth and Students. This may have resulted in a sample of youth with higher levels of HIV/AIDS awareness than other youth since they had previously been exposed to HIV/AIDS campaigns and interventions.

Finally, as with all qualitative research, results from the focus groups conducted in this study cannot be generalized to larger populations of youth in the East and Southern Africa region. Although the findings reveal information on trusted partners among youth and the effect trust can have on risk perception and sexual decision-making, the boundaries of these findings are unknown and the generalizability of findings can only be determined through a validation study.

## Reference List

- Stat Complier [Web Page]. URL [www.measuredhs.com](http://www.measuredhs.com) [2002, June 21].
- Adamchak, D. J., Mbizvo, M. T., & Tawanda, M. (1990). Male knowledge of and attitudes and practices towards AIDS in Zimbabwe. AIDS, 4(3), 245-250.
- Adetunji, J., & Meekers, D. (2001). Consistency in condom use in the context of HIV/AIDS in Zimbabwe. Journal of Boisocial Science, 33, 121-138.
- Agha, S. (1998). Sexual Activity and Condom Use in Lusaka, Zambia. International Family Planning Perspectives, 24(1), 32-37.
- Agha, S., Kusanthan, T., Longfield, K., Klein, M., & Berman, J. (2002). Reasons for non-use of condoms in eight countries in sub-Saharan Africa. Washington, DC: Population Services International.
- Amaro, H. (1995). Love, Sex and Power: considering women's realities in HIV prevention. American Psychologist, 50, 437-477.
- Bila, P., Buyungo, P., Djagba, B., Foyet, L., Kaai, S., Machaieie, S., Nyashalu, C., Omeriege, G., Pislaru, E., Sapalalo, P., Shiliya, N., Taruberekera, N., Thindwa, W., & Vaganda, A. B. (2002). Eritrea 2001 KAP. Washington, DC: PSI.
- Calvès, A. E. (1999). Condom Use and Risk Perceptions among Male and Female Adolescents in Cameroon: Qualitative Evidence from Edéa Washington, DC: PSI.
- Fortenberry, J. T. W., Harezlak, J., & et al. (2002). Condom use as a function of time in new and established adolescent sexual relationships. American Journal of Public Health, 92(2), 211-213.
- Gavin, J. (2000). Arousing suspicion and violating trust: the lived ideology of safe sex talk. Culture, Health and Sexuality, 2(2), 117-134.
- Hillier, L., Harrison, L., & Warr, D. (1998). "When you carry condoms all the boys think you want it": negotiating competing discourses about safe sex. Journal of Adolescence, 21, 15-29.
- Holland, J., Ramazanoglu, C., Scott, S., Sharpe, S., & Thomson, R. (1991). Between Embarrassment and Trust: Young Women and the Diversity of Condom Use. P. Aggleton, G. Hart, & P. Davies (pp. 127-148). Bristol, PA: The Falmer Press.
- Holland, J., Ramazanoglu, C., Scott Sue, Sharpe, S., & Thomson, R. (1992). Risk, Power and the possibility of pleasure: young women and safer sex. AIDS Care, 4, 273-283.
- Hynie, M., Lydon, J. E., Cote, S., & Wiener, S. (1998). Relational scripts and women's condom use: the importance of internalized norms. Journal of Sex Research, 35, 370-380.

- Ingham, R., Woodcock, A., & Stenner, K. (1991). Getting to Know You... Young People's Knowledge of their Partners at First Intercourse. Vol. 1, 117-132.
- Kirkman, M., Rosenthal, D., & Smith, A. (1998). Adolescent sex and the romantic narrative: why some young heterosexuals use condoms to prevent pregnancy but not disease. Psychology Health and Medicine, 3, 355-370.
- Ku, L., Sonenstein, F. L., & Pleck, J. H. (1994). The dynamics of young men's condom use during and across relationships. Family Planning Perspectives, 26, 246-251.
- Lansky, T. E. (1998). Partner-Specific Sexual Behavior among Persons with both Main and Other Partners. Vol. 30, 93-96.
- Lear, D. (1995). Sexual Communication in the age of AIDS: the construction of risk and trust among young adults. Social Science and Medicine, 41, 1311-1323.
- MacPhail, C., & Campbell C. (2001). 'I think condoms are good but, aai, I hate those things': condom use among adolescents and young people in a Southern African township. Social Science & Medicine, 52(11), 1613-1628.
- Meekers, D. (2001). Patterns of Condom Use in Urban Males in Zimbabwe: Evidence from 4,600 Sexual Contacts. Washington, DC: PSI.
- Meekers, D., & Calves, A.-E. (1997). "Main" Girlfriends, marriage, and money: The social context of HIV Risk behavior in sub-Saharan Africa. Health Transition and Review, 7(Supplement), 316-375.
- Meekers, D., Klein, M., & Foyet, L. (2001). Patterns of HIV risk behavior and condom use among youth in Yaoundé and Douala, Cameroon. Washington, DC: PSI.
- Mehryar, A. (1995). Condoms: awareness, attitudes and use. Sexual Behavior and AIDS in the Developing World. London: Taylor and Francis.
- Mnyika, K. S., Kvale, G., & Klepp, K. I. (1995). Perceived function of and barriers to condom use in Arusha and Kilimanjaro regions in Tanzania. AIDS Care, 7(3), 295-305.
- Monitoring the AIDS Pandemic (MAP) Network. (2000). Geneva, Switzerland: The Joint United Nations Programme on HIV/AIDS (UNAIDS).
- National Research Council. (1996). Preventing and Mitigating AIDS in Sub-Saharan Africa (Summary): Research and Data Priorities for the Social and Behavioral Sciences. Washington, DC: National Academy Press.
- Plichta, S., Weisman, C. S., Nathanson, C. A., Ensminger, M., & Robinson, J. C. (1992). Partner-specific condom use among adolescent women clients of a family planning clinic. Journal of Adolescent Health, 13, 506-511.

- Reinecke, J., Schmidt, P., & Ajzen, I. (1996). Application of the theory of planned behavior to adolescent's condom use: a panel study. Journal of Applied Psychology, 26(9), 749-72.
- Tanzania National Bureau of Statistics, & Macro International Inc. (2000). Tanzania Reproductive and Child Health Survey 1999. Calverton, MD: Tanzania National Bureau of Statistics and Macro International Inc.
- The Joint Programme on HIV/AIDS (UNAIDS). (1999). The UNAIDS Report. Geneva, Switzerland: UNAIDS.
- . (2000a) Epidemiological facts sheet on HIV/AIDS and sexually transmitted infections: Zambia [Web Page]. URL [http://www.unaids.org/hiv aidsinfo/statistics/fact\\_sheets/pdfs/Zambia\\_en.pdf](http://www.unaids.org/hiv aidsinfo/statistics/fact_sheets/pdfs/Zambia_en.pdf) [2002a, June 21].
- . (2000b) Epidemiological facts sheet on HIV/AIDS and sexually transmitted infections: Zimbabwe [Web Page]. URL [http://www.unaids.org/hiv aidsinfo/statistics/fact\\_sheets/pdfs/Zimbabwe\\_en.pdf](http://www.unaids.org/hiv aidsinfo/statistics/fact_sheets/pdfs/Zimbabwe_en.pdf) [2002b, June 14].
- . (2000c) Epidemiological facts sheet on HIV/AIDS and sexually transmitted infections: Eritrea [Web Page]. URL [http://www.unaids.org/hiv aidsinfo/statistics/fact\\_sheets/pdfs/Eritrea\\_en.pdf](http://www.unaids.org/hiv aidsinfo/statistics/fact_sheets/pdfs/Eritrea_en.pdf) [2002c, June 14].
- . (2000d) Epidemiological facts sheet on HIV/AIDS and sexually transmitted infections: United Republic of Tanzania [Web Page]. URL [http://www.unaids.org/hiv aidsinfo/statistics/fact\\_sheets/pdfs/Tanzania\\_en.pdf](http://www.unaids.org/hiv aidsinfo/statistics/fact_sheets/pdfs/Tanzania_en.pdf) [2002d, June 14].
- Waldby, C., Kippax, S., & Crawford, J. (1993). Cordon sanitaire: 'clean' and 'unclean' women in AIDS discourse of young heterosexual men. AIDS: Facing the Second Decade (pp. 29-38). New York: Falmer Press.
- Williams, M., Ross, M. W., Bowen, A. M., Timpson, S., McCoy, H. V., Perkins, K., Saunders, L., & Young, P. (2001). An investigation of condom use by frequency of sex. Sexually Transmitted Infections, 77, 433-435.
- Wingood, G., & DiClemente, R. (1998). Partner influences and gender-related factors associated with noncondom use among young adult African American women. American Journal of Community Psychology, 26, 29-51.
- World Bank. (1997). Confronting AIDS: Public Priorities in a Global Epidemic. New York: Oxford University Press.